Effective October 1, 2004												<u> </u>
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			_	THAN ENTITY
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE
FOR.			NUMBER FILED		NUMBER EXTRA			BASIC FEI	395.00	OR	BASIC FEE	· 79 0.00
TOTAL CHARGEABLE, CLAIMS			6.3 mi	กบร 20=	• 43			X\$ 9=	387	OR	X\$18=-	
INDEPENDENT CLAIMS			2 minus 3 =					X44=		OR	X88=	
MU	LTIPLE DEPE	NDENT CLAIM P	RESENT				+150=		OR	+300=	· * · · · · · · · · · · · · · · · · · ·	
* If the difference in column 1 is less than zero, enter *0* in column 2								TOTAL	7200	<u>.</u>	TOTAL	
CLAIMS AS AMENDED - PART II (Column 2) (Column 3)							•	SMALL	PP	OR	OTHER SMALL I	
MENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE
MON	Total	. 63	Minus	- 6	3	=		X\$ 9=	0.	OR	X\$18=	
AMENDA	Independent	2	Minus	DENDENT.	CLAN	-		X44=	0	OR	X88=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+150=		OR	+300=	
	•				•		IL A	TOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)					•	
NT B		CLAIMS REMAINING AFTER ARTHURAGENT	·	HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Totei	•	Minus	17	•	i		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	. ### .		=	•	X44=		OR	X68=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+150=		OR	+300=	
			•		•	•	A	TOTAL.		OR ,	TOTAL ADDIT. FEE	
				Octom	m 21	5.74.05.31						•
ENTC		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total .	•	Minus ·	44		± · :		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus ,	***	•	.	t	X44=		t	X88=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
• 4	(the autor to cal-	ma 1 te lace than m	a partu la sol-	ma 2 weids	'0°'' ~ ~ ·	hima 3		+150=		OR	+300=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE												

Application or Docket Number